2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2005 8:00 am
Secretary of State
03-16-2005 90030 009 ****61.25

DOCUMENT # 735511

1. Entity Name
GENEALOGICAL SOCIETY OF OKALOOSA COUNTY, FLORIDA, INC.

Principal Place of Business	Mailing Address
239 LAFITTE CRESCENT FORT WALTON BEACH, FL 32547 US	PO BOX 1175 FT. WALTON BCH, FL 32549 US

02102005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
343 Shannon Ct.	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Ft. Walton Beach, FL	City & State
Zip: 32548 Country: U.S.A.	Zip Country

4. FEI Number 51-0201772 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HARRIS, MARGARET 239 LAFITTE CRESCENT FORT WALTON BEACH, FL 32547	Name: Charles J. Licari Street Address (P.O. Box Number is Not Acceptable): 343 Shannon Ct. City: Ft. Walton Beach FL Zip Code: 32548

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Charles J. Licari 3/12/05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PPD SENTERFITT, RONALD 6034 GARDEN CITY RD. CRESTVIEW, FL 32539	☒ Delete	PPD Harris, Margaret 239 Lafitte Crescent Ft. Walton Beach, FL	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD D HARRIS, MARGARET 239 LAFITTE CRESCENT FORT WALTON BEACH, FL 32547	☐ Delete	PD Charles J. Licari 343 Shannon Ct. Ft. Walton Beach, FL 32548	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD RUCKEL, C W 222 ROCKWOOD LN NICEVILLE, FL 32578	☐ Delete	V.P. D Beverly Gross 4468 Woodbridge Rd Niceville, FL 32578	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	1VPD SENTERFITT, RONALD 6034 GARDEN CITY RD. CRESTVIEW, FL 32539	☒ Delete	V.P. D Rita Bartmess 129 Willard Rd N.W Ft. Walton Beach, FL 32548	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	SEC. D ~~Jo Ann~~ Joan La Cross 379 Gardner Dr. Ft. Walton Beach, FL 32548	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Charles J. Licari 2/14/05 850-882-7100 (O) 850-243-6696 (H)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

President, LICARI, Charles J.